

North Carolina Air National Guard

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(The Guard is Family)



Veterans Affairs Directive Gives Priority to Disabled Vets

By Sgt. 1st Class Doug Sample, USA, American Forces Press Service

WASHINGTON, Jan. 9, 2004 - The Veterans Affairs Department [<http://www.va.gov/>] wants to send veterans with service-connected medical problems to the front of the line when it comes to receiving medical treatment at VA facilities. VA Secretary Anthony J. Principi issued a new directive to all VA medical facilities requiring that "priority access" be given to qualifying veterans seeking appointments for treatment. The directive covers hospitalization and outpatient care, and does not apply to veterans seeking care for medical problems not related to a service-connected disability.

Priority access, Principi explained, means that when qualifying veterans come to a VA treatment facility for inpatient or outpatient care, they will receive an appointment within 30 days. "It's really as simple as that," he said. Veterans seeking treatment need only let the administrative clerk or nurse know of their service-connected disability status, the secretary

added. If a VA facility is unable to schedule an appointment within the 30-day time limit, an appointment must be arranged for care at another VA facility, or at a facility under contract in the private sector. "I've always felt that it is important to give veterans with service-connected disabilities a priority for care," he said. "I want to make sure that those who have disability related to military service have a high priority for health care, whether it is inpatient or outpatient, and this new priority scheme is to ensure that those who are disabled go to the 'front of the line.'" The new policy will not be without its challenges. Some 25 million veterans are in VA's health care system, and the department reports the number of veterans seeking medical care has risen significantly, from 2.9 million in 1995 to nearly 5 million in 2003. The VA operates more than 1,300 medical facilities, including 162 hospitals and 800 outpatient clinics, but officials report the increase in veterans seeking care "outstrips VA's capacity to treat them." The secretary acknowledged that veterans have suffered long waits for appointments at medical facilities in some parts of the country, but he said the goal for his department will be to reduce those lines and to ensure that veterans are cared for in a timely manner.

In the past, priority access to health care went only to veterans with disabilities rated at 50 percent or more; for severely disabled veterans, priority is extended for non-service-connected medical problems, according to VA guidelines. However, Principi said, the new directive now makes priority access available to all veterans injured in service to the country. He said the VA was established to care for the men and women who served in the armed forces, and that "we should never lose sight of that." He said his department's priority must "always be the men and women disabled in service to their country."

In addition, Principi said his department will work harder to reduce the backlog of disability claims for veterans. And he said VA is making "tremendous progress" in that effort.

"They've shown renewed commitment ensuring that if a veteran files a claim for disability compensation, he or she doesn't have to wait six months to a year. We are going to get that claim decided in 100 days or less."

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Reserve and Guard Receive Unlimited Commissary Benefits

The Department of Defense announced today that with the president's signing of the National Defense Authorization Act for Fiscal Year 2004, effective immediately, the following members and their dependents will be permitted unlimited access to commissary stores:

- * Members of the Ready Reserve (which includes members of the Selected Reserve, Individual Ready Reserve and Inactive National Guard) and members of the Retired Reserve who possess a Uniformed Services Identification Card.
- * Former members eligible for retired pay at age 60 but who have not yet attained the age of 60 and who possess a Department of Defense Civilian Identification Card.
- * Dependents of the members described above who have a Uniformed Services Identification Card or who have a distinct identification card used as an authorization card for benefits and privileges administered by the Uniformed Services.

"Instructions have gone out to all continental U.S. stores informing them that reservists now have unlimited shopping and telling store managers how to welcome members of the National Guard and Reserve to the full use of the commissary benefit," said Patrick Nixon, deputy director of the Defense Commissary Agency. "Commissary shoppers will begin to see banners saying 'Welcome Guard and Reserve to Full Time Savings,' along with other events recognizing these new full-time shoppers."

Guard and Reserve members were authorized only 24 commissary shopping days per calendar year until today when the president signed the National Defense Authorization Act, which contained provisions eliminating the restrictions. Commissaries have immediately adopted the new provisions, which means Guard and Reserve members will no longer have to present a Commissary Privilege Card when they shop.

"I want to thank Congress and the Department of Defense for their efforts in bringing the commissary shopping privilege to the total force," said Patrick Nixon, deputy director of the Defense Commissary Agency. "The Congress included unlimited commissary benefits in the National Defense Authorization Act thus making full time shopping possible for the men and women who serve their nation in the National Guard and Reserve."

Nixon noted that special thanks should go to Charles Abell, principal deputy under secretary of defense for personnel and readiness. Abell acted decisively and immediately in providing interim authority for the Reserve component to have full-time commissary shopping just in time to take advantage of holiday savings.

Support our Troops

Thousands of Americans are asking what they can do to show their support for servicemembers, especially those serving overseas in this time of war. Below are Web sites for several organizations that are sponsoring programs for members of the Armed Forces overseas. While it would be inappropriate for the Department to endorse any specifically, servicemembers do value and appreciate such expressions of support:

Online

Donate to “[Operation USO Care Package](#)”

Donate a calling card to help keep servicemembers in touch with their families at [Operation Uplink](#)

Armed Services Blood Program

Donate to the American Red Cross
Give Blood to the American Red Cross

American Red Cross Armed Forces Emergency Services

National Military Family Association

Tragedy Assistance Program for Survivors

Army Emergency Relief

Navy-Marine Relief Society

Air Force Aid Society

Coast Guard Mutual Assistance

The American Legion

AMVETS Voices From Home™ allows serving military members and their families and friends to send and receive immediate voice e-mail messages to hear the actual voices of their loved ones, regardless of the schedule difficulties, in remote locations around the world.

Send a greeting via e-mail through Operation Dear Abby <http://anyservicemember.navy.mil> or <http://www.OperationDearAbby.net>

New military tax act offers lots of help

Copley News Service, November 24, 2003 Monday, By Ann Perry

The new tax bill President Bush signed on Veterans Day does far more than provide a much-needed increase in military death benefits. The Fallen Patriots Tax Act had earlier been named the Military Family Tax Relief Act, which better describes its broad benefits.

The law provides tax breaks to reservists and **National Guard** troops, who have increasingly been called on to serve in the war on terrorism; ensures tax exclusions on military child care benefits; saves military families money when selling their homes; and expands the special extensions on filing income tax returns, not just to troops deployed in combat but to those serving in “contingency operations” as well.

Here are the key provisions:

Death Benefits. The new law doubles the benefit from \$6,000 to \$12,000, and makes it retroactive to Sept. 11, 2001, so it covers military operations in Afghanistan, Iraq and elsewhere in the fight against terrorism. Traditionally, military death benefits have been tax-free. However, in 1991 when Congress raised the benefit from \$3,000 to \$6,000, it failed to exclude the \$3,000 increase from taxation. The new bill increases the exclusion to \$12,000, the same amount as the benefit.

National Guard and Reserve Travel. Many reservists who must travel incur substantial travel expenses that are not necessarily reimbursed by the military. Under current tax law, it is difficult if not impossible for many reservists to receive any tax breaks on these expenses. If, like 75 percent of all taxpayers, they do not itemize their tax returns, they cannot deduct the expenses. And if they do itemize, they can count the travel costs as “unreimbursed business expenses,” but only to the extent they exceed 2 percent of adjusted gross income. “I suspect that excluded about 95 percent of all reservists,” says George Jones, senior tax analyst with CCH Inc., a leading tax information provider. That means a reservist whose adjusted gross income is \$60,000 could deduct travel expenses only if they exceeded \$1,200, or 2 percent of his or her income. With the new law, all **National Guard** troops and reservists can take the deduction, whether they itemize or not, as an “above-the-line deduction.” The travel must be overnight, more than 100 miles from home and up to the amount allowable as per diem, applicable to the locale, by the Department of Defense.

Deductions apply to amounts paid or incurred in tax years, starting with tax year 2003.

Home Sale Exclusion. All taxpayers are allowed to exclude from taxes gains made on the sale of their principal residences - up to \$250,000 for single taxpayers and \$500,000 for married couples - provided they owned and lived in the properties as their principal residences for two out of five years before selling. The new law gives military personnel the ability to suspend for 10 years the running of the two- and five-year periods while away on active duty assignments.

As an example, Jones says, a couple purchases a home in January 2003 and then are shipped overseas in January 2004. They rent the home out. Their five-year testing period would normally end in 2008. Now, though, they have until 2014 to complete their second year of occupancy before selling while reaping their capital gains exclusion. Of course, another option available to the military before the new law was to take any capital gains accrued from home ownership in less than two years on a pro-rated basis, says Jones.

Homeowners Assistance. Currently the Department of Defense compensates military homeowners whose housing values have fallen because of military base closures. The amount the department pays over the diminished market value has been counted as income. Now it will be excluded.

Dependent Care. The military provides extensive child-care programs to its employees. This law clarifies that child-care benefits will not be counted as income, starting with tax year 2003. The exclusion is available to members of the Army, Navy, Air Force, Marine Corps and Coast Guard.

Combat Zone Filing Rules. Special extensions to file federal income tax returns and other documents that have been available to service personnel in combat zones are now offered to troops deployed in “contingency operations.” The Secretary of Defense designates these operations as ones in which U.S. forces are, or could become, involved in military actions. The United States currently has some 25 combat zones worldwide designated by the president. Typically, deadlines for IRS returns are extended for the period of service plus 180 days.

The \$1.2 billion cost of the tax bill will be funded by higher customs fees.

2004 Guide to Military & Veteran Education Still Available

Servicemembers and veterans interested in using their GI Bill benefits now have a new resource. The 2004 Guide to Military & Veteran Education has been released as is available at no cost to [Military.com](http://www.military.com) members. The Guide provides valuable information and tips on using GI Bill benefits, getting college credit for military service, accelerated degree programs, and finding additional money to fund education. The Guide is free, and is available to all servicemembers, veterans and dependants who request information on degree programs from military-friendly schools. Request information here: <http://www.military.com/Education/Lead1>

TRICARE
Important
Telephone Numbers

TRICARE FOR LIFE
1-888-363-5433

PHARMACY
1-877-363-6337

**NATIONAL MAIL
ORDER PHARMACY**
1-866-363-8667

**TRICARE
PRIME REMOTE**
1-888-363-2273

TRICARE DENTAL
1-888-622-2256 (Enrollment)
1-800-866-8499 (Information)

**REGION 1
NORTH EAST**
1-888-999-5195

**REGION 2
MID - ATLANTIC**
1-800-931-9501

**REGION 3
SOUTHEAST**
1-800-444-5445

**REGION 4
GULF SOUTH**
1-800-444-5445

**REGION 5
HEARTLAND**
1-800-941-4501

**REGION 6
SOUTHWEST**
1-800-406-2832

**REGION 7/8
CENTRAL**
1-888-874-9378

**REGION 9
SOUTHERN CALIFORNIA**
1-800-242-6788

**REGION 10
GOLDEN GATE**
1-800-242-6788

**REGION 11
NORTHWEST**
1-800-404-4506

An Important Message about TRICARE and Medicare

Recently, the House and Senate passed the “Medicare Prescription Drug, Improvement, and Modernization Act of 2003.” The President is expected to sign the bill into law shortly. This bill is extensive and complex, and it makes dramatic changes to Medicare. It is important for uniformed services beneficiaries to understand the effect these changes may have on them in the near future and in the years to come.

A preliminary assessment of some of the bill’s provisions is presented below. As additional provisions of interest to uniformed services beneficiaries are identified, and as more information becomes available, we will update this site. We intend to work closely with beneficiary representatives to ensure that important information gets the widest possible distribution. In the meantime, if beneficiaries have questions about their TRICARE benefits, they should contact their local TRICARE Service Center for assistance.

Medicare Prescription Drug Benefits

For most Americans, the most significant aspect of the new bill is that it introduces an outpatient prescription drug benefit. This does not affect uniformed services beneficiaries their TRICARE pharmacy benefits will continue as a separate program.

Beneficiaries who desire to participate in the Medicare outpatient prescription plan should enroll when first eligible. If a beneficiary does not enroll when first eligible, and subsequently desires to do so, an annual late penalty would normally be assessed. However, TRICARE pharmacy benefits are considered a creditable prescription plan under the bill, and as such, uniformed services beneficiaries who do not enroll in the Medicare prescription drug benefit when first eligible do not have to pay an annual penalty if they subsequently enroll because they involuntarily lost their eligibility under TRICARE. Individuals could involuntarily lose their TRICARE eligibility when a dependent widow or widower remarries a person who is not a uniformed services member or retiree, or when a dependent and member or retired member divorce, and the dependent spouse does not qualify under the law as an eligible former spouse for TRICARE benefits.

The TRICARE pharmacy benefit provides excellent coverage and wide availability of services through military facilities, retail pharmacies, and mail order. Thus, it is likely that the vast majority of uniformed services beneficiaries will not find it advantageous to enroll in the new Medicare pharmacy benefit. TRICARE and Medicare will need to establish procedures for coordination of benefits for beneficiaries who do decide to sign up for the Medicare benefit.

Part B Premiums

The bill makes three very important changes relating to enrollment in Medicare Part B, the Supplementary Medical Insurance Program. The first two changes affect persons not enrolled, or paying surcharges because they enrolled after they were initially eligible for Part B:

First, uniformed services beneficiaries who would be eligible for TRICARE For Life, but are not enrolled in Medicare Part B, may enroll without penalty during a special enrollment period through December 31, 2004. The special enrollment period will be announced via Medicare on the TRICARE Web site (www.tricare.osd.mil) and publicized widely.

Second, uniformed services beneficiaries who enrolled in Medicare Part B in 2001, 2002, 2003, or 2004 and are subject to a premium surcharge for late enrollment in Part B can get those surcharges eliminated by demonstrating that they are covered under TRICARE. The elimination of surcharges is effective January 1, 2004, but the Department of Health and Human Services will need to work out procedures to be followed. Procedures will be announced via Medicare on the TRICARE Web site (www.tricare.osd.mil) and publicized widely.

The third change made by the bill affects all seniors, not just uniformed services beneficiaries. The Part B premium will be tied to income, beginning in 2007. Individuals with incomes above \$80,000 will pay more, and couples with incomes above \$160,000 will pay more.

Medicare Advantage Program

The bill introduces several enhancements to the current Medicare+Choice program that are expected to increase the availability of private plans offering benefits to Medicare beneficiaries. TRICARE For Life beneficiaries can enroll in Medicare+Choice plans (and TRICARE will reimburse their copayments). More details about Medicare+Choice plans are available on the Medicare Web site: <http://www.medicare.gov/Choices>. Most people eligible for Medicare use traditional fee-for-service Medicare.

The bill includes provisions for a pilot program beginning in 2010 (the Comparative Cost Adjustment program) that could result in increased Part B premiums for persons in traditional fee-for-service Medicare, if sicker patients gravitate to private plans in the test sites.

Provider Reimbursement Provisions

The bill includes numerous provisions relating to reimbursement of hospitals, physicians, and other service providers. Significantly, physicians will receive a 1.5 percent payment increase in 2004 for 2005, rather than the reduction that was anticipated.

Medicare Part B Deductible

The bill increases the Medicare Part B deductible to \$110 in 2005 and indexes it to inflation for subsequent years. This should have minimal impact on uniformed services beneficiaries, since the Medicare deductible is payable by TRICARE.

TRICARE Important Telephone Numbers

TRICARE Pacific

Alaska & Hawaii
800-242-6788

WESTPAC
888-777-8343

Latin America &
Canada
888-777-8343

Puerto Rico &
Virgin Islands
888-777-8343

Europe
888-777-8343

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Telephone Numbers

TRICARE FOR LIFE
1-888-363-5433

PHARMACY
1-877-363-6337

**NATIONAL MAIL
ORDER PHARMACY**
1-866-363-8667

**TRICARE
PRIME REMOTE**
1-888-363-2273

TRICARE DENTAL
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1-800-866-8499 (Information)

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1-800-931-9501

**REGION 3
SOUTHEAST**
1-800-444-5445

**REGION 4
GULF SOUTH**
1-800-444-5445

**REGION 5
HEARTLAND**
1-800-941-4501

**REGION 6
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**REGION 10
GOLDEN GATE**
1-800-242-6788

**REGION 11
NORTHWEST**
1-800-404-4506

TRICARE FOR RETIRED RESERVISTS:

Members of the Reserve and Guard with enough credits for retirement become eligible for Tricare at age 60. Also eligible at that time are the spouses, and all unmarried children under the age 21, or under age 23 if a full-time college student. A spouse who hasn't remarried and eligible children of a qualified reservist who died before reaching age 60 also becomes eligible on the date the deceased reservists would have turned 60. Federal law establishes Tricare eligibility for designated categories of people. Only the services have the authority to determine if a given person meets legal criteria for Tricare eligibility, to register the person in DEERS, and to issue the appropriate ID military cards or letters of authorization. About three to six months before the sponsor is to reach age 60, eligible personnel should contact the personnel section at their Reserve or Guard component to complete an application for retired benefits. At that time the retiree or widow can register family members. The personnel office will enter those eligible in the DEERS computer and issue a card/s effective on the date of the sponsor attaining age 60. For details about your Tricare program contact the Patient Administration Office at your military hospital, visit at www.tricare.osd.mil, or request an information packet from the Tricare Management Activity, 16401 E. Centretch Parkway, aurora CO 80011-9032. For questions about coverage of a specific medical service or preauthorization requirements, contact you Tricare Service Center. [Source: Navy Times Jim Hamby mcochamp@aol.com]

Providers may fax prescriptions to the TRICARE Mail Order Pharmacy (TMOP).

Many prescription pads used by providers contain embedded watermarks to prevent fraud and forgery. When prescriptions written on watermarked pads are faxed to TMOP, the watermarked area of the copy received at TMOP is black and unreadable or totally blank. To allow TMOP to contact a provider when an unreadable watermarked prescription is received, a cover sheet containing the provider's name and telephone number should be faxed along with every prescription. TMOP receives thousands of faxes daily and will make every attempt to track down providers as long as they have contact information.

A cover sheet included with every prescription that's faxed to TMOP would be the best possible way to provide the needed contact information and, as a result, prevent unnecessary delays in providing services to TMOP beneficiaries.

Please remind your provider to include a cover sheet, with his/her name and phone number, when prescriptions are faxed to TMOP.

TMOP related information is available online at <http://www.tricare.osd.mil/pharmacy/tmop.cfm>

Communication Key in Making TRICARE Better, DoD Health Official Says

By Gerry J. Gilmore, American Forces Press Service

WASHINGTON, Nov. 6, 2003 – It's important that leaders and communicators at TRICARE — the Defense Department's health care plan — are on the same page in providing accurate, timely information to beneficiaries and other audiences, DoD's top health care official said here Nov. 4. Speaking at a TRICARE communications training conference, Dr. William Winkenwerder Jr. said that he considers "all aspects of communications to be one of the most important responsibilities that I have as the assistant secretary of defense for health affairs." Communicating effectively, Winkenwerder pointed out, relies on leadership participation, advocacy and accuracy.

Assembling a good communications staff is a paramount component in getting the word out to TRICARE's audiences "in order to make a strong program even better," he said. Yet, a good communications program "also requires a leadership team" that provides resources, planning and execution guidance for information campaigns, Winkenwerder noted. An example of such leadership, he explained, is demonstrated with the new generation of TRICARE contracts signed just this August, "in which we assume primary responsibility for communications development and product distribution." The new contracts, which are slated for implementation starting June through November 2004, consolidate 11 stateside TRICARE regions into three uniformly managed North, South and West regions.

TRICARE providers, Winkenwerder continued, will also strive to reduce customers' claims times, bolster quality of care and improve customer service at both stateside and overseas medical facilities. And more business will be directed to military treatment facilities, he continued, which will also increase emphasis on customer service.

Communicators "are in the vanguard" of getting the word out about TRICARE improvements, Winkenwerder said, adding the conference "is another one of our investments — and this time that investment is in you." Information about TRICARE is targeted to active duty, reserve component, family member and retiree beneficiaries, Winkenwerder noted, as well as military, civilian, and contractor health care providers.

DoD military and civilian leaders also receive TRICARE communications products, he pointed out, as well as civilian and internal DoD media, veterans organizations, state governments, and members of Congress. For credibility's sake, Winkenwerder noted, it's important to provide accurate, timely information to audiences — to include reporters. However, he added, because of the inherent complexities involved with an organization of TRICARE's size and scope, it's best to place accuracy over speed when providing information. Regarding the release of so-called bad news to the media, Winkenwerder said he subscribes to the philosophy of Victoria Clarke, the former chief of DoD public affairs.

Winkenwerder recalled that she once said bad news does not improve with age. So she believed it was important to release "uncomfortable" news along with good news as soon as possible.

With about 9 million beneficiaries and an annual budget of around \$27 billion, Winkenwerder noted that TRICARE is a global operation with "a vast set of audiences with whom we must communicate."

It's essential, therefore, that TRICARE leaders and communications professionals "ensure that we have an integrated, consistent and tailored communications plan that thinks about and addresses all of those audiences," he concluded.

TRICARE
Important
Telephone Numbers

TRICARE Pacific

Alaska & Hawaii
800-242-6788

WESTPAC
888-777-8343

**Latin America &
Canada**
888-777-8343

**Puerto Rico &
Virgin Islands**
888-777-8343

Europe
888-777-8343

Family Readiness Air Guard Expanded Executive Council

Fisk Outwater - Chairman
Kathleen Flaherty
Terry Henderson
Janice Richardson
Deborah Dunlap - Recognition Committee
Martha Pasour - Youth Committee
Sarah Spivey - Youth Committee

Family Readiness office telephone numbers

- “ 704-398- 4949
- “ Cell Phone: 980-721-4019
- DSN: 231-4239

The fastest way to get in touch with FR is now through the cell phone or pager, someone will answer or get back in touch with you as quickly as possible

Emergency contact calls:

- “ Pager: 1-800-250-4181

*Uniting Our Air Guard
One Family at a Time*



Family Readiness
5225 Morris Field Drive
Charlotte, NC 28208

Phone: 1-800-354-6943 Ext 4949
Cell Phone: 980-721-4019

WE'RE ON THE WEB!
www.ncchar.ang.af.mil

Family Readiness

Charter

Develop a program to provide information, on-going education, and assistance to families, members, and leadership aimed at preparing military members and their families for National Guard Military Life

Mission

Educate, Support, Assist, Communicate, Collaborate, and Sustain